PART B - FEE(S) TRANSMITTAL



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(571) 273-2885 or <u>Fax</u>

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| maintenance fee notification | is. | | | | | | | |
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| | E ADDRESS (Note: Use Block 1 for | any change of address) | ō E | Note: A certificate of Fee(s) Transmittal. T papers. Each addition have its own certificate. | f mailing can only be used for his certificate cannot be used all paper, such as an assignment te of mailing or transmission. | or domestic mailings of the for any other accompanying ent or formal drawing, mus | | |
| 52450 75 KRIEG DEVAUI ONE INDIANA SO SUITE 2800 INDIANAPOLIS, 1/2006 EHRILEZ 00000 | QUARE | 1 | 0 9 2006 B | I hereby certify that States Postal Service addressed to the Ma transmitted to the US | ertificate of Mailing or Trans this Fee(s) Transmittal is bein, with sufficient postage for fir all Stop ISSUE FEE address PTO (571),273-2885, on the c | | | |
|)/5000 EHAILES 00000 | 006 10684638 | 12/2 | .E/ | Sohn H. | Allie /// | (Depositor's name) | | |
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| APPLICATION NO. | FILING DATE | FIRST NAMED INV | | ENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | | |
| 10/684,658 | 10/14/2003 | | Pierre Frenc | h | 27049-5 | 3224 | | |
| TITLE OF INVENTION: CO | OMPRESSOR | | | | · | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FE | EE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | | |
| nonprovisional | NO | \$1400 | · · · · · · · · · · · · · · · · · · · | \$300 | \$1700 | 01/06/2006 | | |
| EXAM | INER | ART UNIT | | CLASS-SUBCLASS | 7 | | | |
| HANAN, | HANAN, DEVIN J | | • | 415-146000 | _ | | | |
| PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND | | e of a Customer E PRINTED ON Tolow, no assignee of this form is NOT | listed, no name THE PATENT (printle data will appear of a substitute for fi | nt or type) | nee is identified below, the d | ocument has been filed for | | |
| ` ' | ering Company, | • • | , 1.25.551 (6 | United K | • | | | |
| | assignee category or categor | | | | Corporation or other private gro | oup entity Governmen | | |
| 4a. The following fee(s) are enclosed: Solution Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies | | | 4b. Payment of Fee(s): ☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-2424 (enclose an extra copy of this form). | | | | | |
| | (from status indicated above MALL ENTITY status. See 3 | • | ☐ b. Applicant is | no longer claiming SMA | ALL ENTITY status. See 37 Cl | FR 1.27(g)(2). | | |
| NOTE: The Issue Fee and Pu | s requested to apply the Issu ublication Fee (if required) w rds of the United States Pate | ill not be accepted | from anyone othe | to re-apply any previous r than the applicant; a reg | sly paid issue fee to the applica gistered attorney or agent; or the | tion identified above. ne assignee or other party i | | |
| Authorized Signature | ant 6 | lly | | Date Ja | nuary 4, 2006 | <u>.</u> | | |
| Typed or printed name | John H. Allie | 3 | | Registration | n No. 39,088 | | | |
| an application. Confidentiali with the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313- | ty is governed by 35 U.S.C. plication form to the USPTG for reducing this burden, sh nia 22313-1450. DO NOT \$1450. | 122 and 37 CFR I O. Time will vary ould be sent to the SEND FEES OR C | .14. This collection depending upon the Chief Information COMPLETED FOR | n is estimated to take 12 e individual case. Any c Officer, U.S. Patent and MS TO THIS ADDRES | the public which is to file (and minutes to complete, includin omments on the amount of tir I Trademark Office, U.S. Depa S. SEND TO: Commissioner displays a valid OMB control | g gathering, preparing, an ne you require to complet artment of Commerce, P.C for Patents, P.O. Box 1450 | | |

PTO/SB/17 (12-04v2)

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| Fees pursuant to the Con- | | Application Number 10/684,6 | | | 8 | | | | |
| | FEE TRANSMITTAL | | | | | October 14, 2003 | | | |
| F | | First Named Inv | ventor P | Pierre French | | | | | |
| | | Examiner Name | е Н | Hanan, Devin J. | | | | | |
| Applicant claims si | <u>"</u> | Art Unit | 37 | 3745 | | | | | |
| TOTAL AMOUNT OF F |) | Attorney Docke | t No. H | OET-3 | | | | | |
| METHOD OF PAYM | ENT (check all | that apply) | | | | | | | |
| Check Cree | lit Card N | Money Order | None | Other (1 | please ident | ify): | | | |
| Deposit Account | Deposit Accoun | t Number: 12-242 | 24 | Deposit A | ccount Name | e: Krieg | DeVau | lt Lundy | |
| For the above-id | entified deposit a | account, the Direct | tor is here | eby authorized to | : (check al | I that app | ly) | | |
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| under 37 WARNING: Information on | CFR 1.16 and 1. | 17 | | | | - | form. Pro | ovide credit card | |
| information and authoriza | | | it our a mile | | | | | | |
| FEE CALCULATION | | | | | | | | | |
| 1. BASIC FILING, SE | | | | | | | | | |
| | FILING I | FEES mall Entity | SEAR | CH FEES EXAMINATION FEES Small Entity Small Entity | | | | | |
| Application Type | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$ | Fee (| | Fees Paid (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | | | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | | |
| 2. EXCESS CLAIM | FEES | | | | | En | Small Entity Fee (\$) Fee (\$) | | |
| Fee Description Fach claim over 2 | O (including R | eiccuec) | | | | 20 6 (2) | <u>Fee (\$)</u> 25 | | |
| Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) | | | | | | | | 100 | |
| Multiple depender | | | | .00 60 | 180 | | | | |
| Total Claims | Extra Clain | ns <u>Fee (\$)</u> | Fee | Paid (\$) | | | tiple De | pendent Claims | |
| - 20 or HP = x = | | _= | | | | e (\$) | Fee Paid (\$) | | |
| HP = highest number of Indep. Claims | | | | | | | | | |
| 3 or HP | | x | _= | Paid (\$) | | | | | |
| HP = highest number of i | | paid for, if greater th | han 3. | | | | | | |
| 3. APPLICATION SIZE If the specification is | ZE FEE | vosed 100 sheet | te of nan | er (evoluding e | electronic | ally filed | l seguen | ice or computer | |
| | | | | | | | | each additional 50 | |
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| sheets or fraction Total Sheets | | | er of each | additional 50 c | or fraction | thereof | Fee (| \$) Fee Paid (\$ | <u> </u> |
| 100 | | / 50 = | | (round up to a v | wnoie numi | ber) x | | = | - |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) | | | | | | | | Fees Paid | <u>(\$)</u> |
| Other (e.g., late filing surcharge): Issue and Publication Fee | | | | | | | | 1700.00 | |
| SUBMITTED BY | 11 | Ca.1 | | | | | | | |
| Registration No. (Attorney/Agent) 39,088 | | | | | | | Telephone 317-636-4341 | | |
| Name (Print/Type) John H. Allie | | | | | | | Date January 4, 2006 | | |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.